

**FCC Form 481 - Carrier Annual Reporting
Data Collection Form**

 FCC Form 481
 OMB Control No. 3060-0986/OMB Control No. 3060-0819
 July 2013

<010>	Study Area Code	462196
<015>	Study Area Name	PEETZ COOP TEL CO
<020>	Program Year	2015
<030>	Contact Name: Person USAC should contact with questions about this data	Brent Davis
<035>	Contact Telephone Number: Number of the person identified in data line <030>	9703342278 ext.
<039>	Contact Email Address: Email of the person identified in data line <030>	brent@peetzplace.com

ANNUAL REPORTING FOR ALL CARRIERS		54.313 Completion Required	54.422 Completion Required
		(check box when complete)	
<100>	Service Quality Improvement Reporting (complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<200>	Outage Reporting (voice) (complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<210>	<input checked="" type="checkbox"/> <-- check box if no outages to report	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<300>	Unfulfilled Service Requests (voice) 0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<310>	Detail on Attempts (voice) (attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<320>	Unfulfilled Service Requests (broadband) 0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<330>	Detail on Attempts (broadband) (attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<400>	Number of Complaints per 1,000 customers (voice)		
<410>	Fixed 0.0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<420>	Mobile 0.0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<430>	Number of Complaints per 1,000 customers (broadband)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<440>	Fixed 0.0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<450>	Mobile 0.0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<500>	Service Quality Standards & Consumer Protection Rules Compliance (check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<510>	462196CO510.pdf (attached descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<600>	Functionality in Emergency Situations (check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<610>	462196CO610.pdf (attached descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<700>	Company Price Offerings (voice) (complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<710>	Company Price Offerings (broadband) (complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<800>	Operating Companies and Affiliates (complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<900>	Tribal Land Offerings (Y/N)? <input type="radio"/> <input checked="" type="radio"/> (if yes, complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1000>	Voice Services Rate Comparability (check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1010>	462196CO1010.pdf (attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1100>	Terrestrial Backhaul (Y/N)? <input checked="" type="radio"/> <input type="radio"/> (if not, check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1110>	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1200>	Terms and Condition for Lifeline Customers (complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

<2000>	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<2005>	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet

<3000>	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<3005>	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

(100) Service Quality Improvement Reporting
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	462196
<015>	Study Area Name	PEETZ COOP TEL CO
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Brent Davis
<035>	Contact Telephone Number - Number of person identified in data line <030>	9703342278 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	brent@peetzplace.com
<110>	Has your company received its ETC certification from the FCC?	(yes / no) <input type="radio"/> <input checked="" type="radio"/>
	If your answer to line <110> is yes, do you have an existing §54.202(a) "5	
<111>	year plan" filed with the FCC?	(yes / no) <input type="radio"/> <input type="radio"/>
<p>If your answer to line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.</p>		
<112>	Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.	<div>462196C0112.pdf</div>
<p>Please check these boxes below to confirm that the attached documents(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.</p>		
<113>	Maps detailing progress towards meeting plan targets	<input type="checkbox"/>
<114>	Report how much universal service (USF) support was received	<input type="checkbox"/>
<115>	How (USF) was used to improve service quality	<input type="checkbox"/>
<116>	How (USF) was used to improve service coverage	<input type="checkbox"/>
<117>	How (USF) was used to improve service capacity	<input type="checkbox"/>
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.	<input type="checkbox"/>

Name of Attached Document

<010>	Study Area Code	462196
<015>	Study Area Name	PEETZ COOP TEL. CO
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Brent Davis
<035>	Contact Telephone Number - Number of person identified in data line <030>	9703342278 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	brent@peetzplace.com

[illegible]

<010>	Study Area Code	462196
<015>	Study Area Name	PEETZ COOP TEL CO
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Brent Davis
<035>	Contact Telephone Number - Number of person identified in data line <030>	9703342278 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	brent@peetzplace.com
<701>	Residential Local Service Charge Effective Date	1/1/2014
<702>	Single State-wide Residential Local Service Charge	

[illegible]

<010>	Study Area Code	462196
<015>	Study Area Name	PEERTZ COOP TEL CO
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Brent Davis
<035>	Contact Telephone Number - Number of person identified in data line <030>	970342278 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	brent@peertzplace.com

[illegible]

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	462196
<015>	Study Area Name	PEETZ COOP TEL CO
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<030>	Contact Name - Person USAC should contact regarding this data	Brent Davis
<035>	Contact Telephone Number - Number of person identified in data line <030>	9703342278 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	brent@peetzplace.com
<810>	Reporting Carrier	The Peetz Cooperative Telephone Company
<811>	Holding Company	
<812>	Operating Company	

[illegible]

(900) Tribal Lands Reporting
Data Collection Form

FCC Form 481
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July 2013

<010>	Study Area Code	462196
<015>	Study Area Name	PEETZ COOP TEL CO
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Brent Davis
<035>	Contact Telephone Number - Number of person identified in data line <030>	9703342278 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	brent@peetzplace.com
<910>	Tribal Land(s) on which ETC Serves	
<920>	Tribal Government Engagement Obligation	

If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

<921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions.	
<922>	Feasibility and sustainability planning;	
<923>	Marketing services in a culturally sensitive manner;	
<924>	Compliance with Rights of way processes	
<925>	Compliance with Land Use permitting requirements	
<926>	Compliance with Facilities Siting rules	
<927>	Compliance with Environmental Review processes	
<928>	Compliance with Cultural Preservation review processes	
<929>	Compliance with Tribal Business and Licensing requirements.	

Name of Attached Document

**(1100) No Terrestrial Backhaul Reporting
Data Collection Form**

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<030>	Contact Name - Person USAC should contact regarding this data	Brent Davis
<035>	Contact Telephone Number - Number of person identified in data line <030>	970342278 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	brent@peetzplace.com

<1120> Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)

☐

<1130> Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)

☐

<010>	Study Area Code	462196
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<030>	Contact Name - Person USAC should contact regarding this data	Brent Davis
<035>	Contact Telephone Number - Number of person identified in data line <030>	9703342278 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	brent@peetplace.com
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	<div>462196COL1210.pdf</div> <div>Name of Attached Document</div>
<1220>	Link to Public Website	HTTP

"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCS receiving low-income support, carriers must annually report:

- <1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, ☒
- <1222> Details on the number of minutes provided as part of the plan, ☒
- <1223> Additional charges for toll calls, and rates for each such plan. ☒

<010>	Study Area Code	462196
<015>	Study Area Name	PEETZ COOP TEL CO
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Brent Davis
<035>	Contact Telephone Number - Number of person identified in data line <030>	9703342278 ext.1
<039>	Contact Email Address - Email Address of person identified in data line <030>	brent@peetplace.com

CHECK the boxes below to note compliance as a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e) the information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting

<2010>	2nd Year Certification (47 CFR § 54.313(b)(1))	<input type="checkbox"/>
<2011>	3rd Year Certification (47 CFR § 54.313(b)(2))	<input type="checkbox"/>

Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))

<2012>	2013 Frozen Support Certification	<input type="checkbox"/>
<2013>	2014 Frozen Support Certification	<input type="checkbox"/>
<2014>	2015 Frozen Support Certification	<input type="checkbox"/>
<2015>	2016 and future Frozen Support Certification	<input type="checkbox"/>

Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))

<2016>	Certification Support Used to Build Broadband	<input type="checkbox"/>
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Connect America Phase II Reporting (47 CFR § 54.313(e))

<2017>	3rd year Broadband Service Certification	<input type="checkbox"/>
<2018>	5th year Broadband Service Certification	<input type="checkbox"/>
<2019>	Interim Progress Certification	<input type="checkbox"/>
<2020>	Please check the box to confirm that the attached document(s), on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.	<input type="checkbox"/>

<2021>	Interim Progress Community Anchor Institutions	<input type="checkbox"/>
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Name of Attached Document Listing Required Information

(3000) Rate Of Return Carrier Additional Documentation
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	462196
<015>	Study Area Name	PEER2 COOP TEL CO
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Brent Davis
<035>	Contact Telephone Number - Number of person identified in data line <030>	970342278 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	brent@peer2place.com

CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3010)	Progress Report on 5 Year Plan Milestone Certification (47 CFR § 54.313(f)(1)(i))	<div></div> <div>Name of Attached Document Listing Required Information</div>
(3011)	Please check this box to confirm that the attached document(s) on line 3012 contains the required information pursuant to § 54.313 (f)(1)(ii). The carrier shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.	<div></div>
(3012)	Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))	<div></div> <div>Name of Attached Document Listing Required Information</div>
(3013)	Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2))	(Yes/No) <input checked="" type="radio"/> Yes <input type="radio"/> No
(3014)	If yes, does your company file the RUS annual report	(Yes/No) <input checked="" type="radio"/> Yes <input type="radio"/> No
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)	<input checked="" type="checkbox"/>
(3016)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows	462196C03017.pdf <input checked="" type="checkbox"/>
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	<div></div> <div>Name of Attached Document Listing Required Information</div>
(3018)	If the response is no on line 3014, is your company audited?	(Yes/No) <input checked="" type="radio"/> Yes <input type="radio"/> No
(3019)	If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains	<input type="checkbox"/>
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications	<input type="checkbox"/>
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows	<input type="checkbox"/>
(3021)	Management letter issued by the independent certified public accountant that performed the company's financial audit.	<input type="checkbox"/>
(3022)	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:	<input type="checkbox"/>
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers,	<input type="checkbox"/>
(3023)	Underlying information subjected to a review by an independent certified public accountant	<input type="checkbox"/>
(3024)	Underlying information subjected to an officer certification.	<input type="checkbox"/>
(3025)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows	<input type="checkbox"/>
(3026)	Attach the worksheet listing required information	<div></div> <div>Name of Attached Document Listing Required Information</div>

Certification - Reporting Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
-------------------------------------------------------------------	----------------------------------------------------------------------------------

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<015>	Study Area Name	PEETZ COOP TEL CO
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<030>	Contact Name - Person USAC should contact regarding this data	Brent Davis
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<039>	Contact Email Address - Email Address of person identified in data line <030>	brent@peetzplace.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier: PEETZ COOP TEL CO	
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/12/2014
Printed name of Authorized Officer: Brent Davis	
Title or position of Authorized Officer: General Manager	
Telephone number of Authorized Officer: 9703342278 ext.	
Study Area Code of Reporting Carrier: 462196	Filing Due Date for this form: 06/30/2014
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

**Certification - Agent / Carrier
Data Collection Form**

 FCC Form 481
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 July 2013

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<039> Contact Email Address - Email Address of person identified in data line <030>	brent@peetzplace.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) _____ is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier:	
Name of Authorized Agent or Employee of Agent:	
Signature of Authorized Agent or Employee of Agent:	Date:
Printed name of Authorized Agent or Employee of Agent:	
Title or position of Authorized Agent or Employee of Agent:	
Telephone number of Authorized Agent or Employee of Agent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Attachments

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

462196

PELTZ COOP TEL CO

2015

Brent Davis

9703342278 ext.

brent@peetzplace.com

1/1/2014

10

<703>

[illegible]

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<039>	Contact Email Address - Email Address of person identified in data line <030>	brent@peetzplace.com

[illegible]

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<035>	Contact Telephone Number - Number of person identified in data line <030>	9703462278 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	brent@peetzplace.com
<810>	Reporting Carrier	The Peetz Cooperative Telephone Company
<811>	Holding Company	
<812>	Operating Company	

[illegible]

**Before the
FEDERAL COMMUNICATIONS COMMISSION
Washington, D.C. 20554**

In the Matter of)	
)	
Connect America Fund)	CC Docket No. 10-90
)	
Lifeline and Link Up Reform and)	WC Docket No. 11-42
Modernization)	

**Request of The Peetz Cooperative Telephone Company
For Confidential Treatment**

Pursuant to 47 C.F.R. § 0.459 of the Commission's Rules, The Peetz Cooperative Telephone Company requests confidentiality with respect to the submission of the Five-Year Build-Out Plan of The Peetz Cooperative Telephone Company in CC Docket No. 10-90 and WC Docket No. 11-42.

The following information is submitted pursuant to 47 C.F.R. § 0.459(b) of the Commission's rules:

- (1) The Peetz Cooperative Telephone Company requests that the Company's Five-Year Build-Out Plan and Narrative Description and attached herewith be given confidential treatment.
- (2) The Company's Five-Year Build-Out Plan and Narrative Description are submitted to the Commission pursuant to the *USF/ICC Transformation Order* (November 18, 2011) and 47 C.F.R. §§ 54.202(a)(1)(ii) and 54.313(a)(1).
- (3) Specific details, including financial, contained in the Company's Five-Year Build-Out Plan and Narrative Description are confidential commercial information routinely withheld from public inspection in accordance with 47 C.F.R. § 0.457(d).
- (4) The information contained the Company's Five-Year Build-Out Plan and Narrative Description is of both a financial and competitive nature regarding the provision of telecommunications services. The telecommunications industry is highly competitive.

- (5) The financial and competitive information provided herein is information that would not customarily be released to the public. Due to the competitive environment of the marketplace, release of this information could substantially harm The Peetz Cooperative Telephone Company's business and physical infrastructure.
- (6) In order to prevent unauthorized disclosure of the subject information, the attached Five-Year Build-Out Plan and Narrative Description are being filed via express delivery service.
- (7) The subject information is not available to the public or any third parties.
- (8) Pursuant to 47 C.F.R. § 0.457(d), the subject material is not routinely available for public inspection and should continue to be withheld from public inspection at any time now or in the future.
- (9) Not applicable.

Respectfully submitted,

By: 

Brent Davis
General Manager
The Peetz Cooperative Telephone Company
601 Main Street
Peetz, CO 80747
(970) 334-2220

6/11/14

REDACTED - FOR PUBLIC INSPECTION

REDACTED

[The Five-Year Build-Out Plan and Narrative Description of The Peetz Cooperative Telephone Company is redacted in its entirety as Highly Confidential Information]

(510) Service Quality Standards & Consumer Protection Rules Compliance Procedures

Form 481

<010> Study Area Code

462196

<015> Study Area Name

Peetz Coop Tel Co

<020> Program Year

2015

<030> Contact Name - Person USAC should contact regarding this data

Brent Davis

<035> Contact Telephone Number - Number of person identified in data line <030>

970-334-2278

<039> Contact Email Address - Email Address of person identified in data line <030>

brent@peetzplace.com

Service Quality Standards

The company complies with the service quality standards set forth in the following sections of the Colorado Public Utilities Commission (CoPUC) Rules, 4 Code of Colorado Regulations (CCR) 732-2:

- §2334 Construction and Maintenance Practices
- §2337 Standard Performance Characteristics for Customer Access Lines
- §2338 Interexchange Trunk Connections
- §2340 Network Call Completion Requirements

Consumer Protection Rules

The company complies with the following consumer protection rules:

- FCC rules regarding verification of orders for telecommunications service as required of submitting carriers {47 CFR §64.1100}
- CoPUC rule 4 CCR 732-2.2311 Changing Provider/Carrier Presubscription
- The FCC's Truth-in-Billing Requirements {47 CFR §64.2400}
- CoPUC rule 4 CCR 732-2.2304 Customer-Billing Requirements
- All of the requirements of 47 C.F.R. § Part 64 Subpart U, Customer Proprietary Network Information and Federal Trade Commission 16 C.F.R. §681, Identity Theft Red Flags

(610) Functionality in Emergency Situation Procedures

Form 481

<010> Study Area Code

462196

<015> Study Area Name

Peetz Coop Tel Co

<020> Program Year

2015

<030> Contact Name - Person USAC should contact regarding this data

Brent Davis

<035> Contact Telephone Number - Number of person identified in data line <030>

970-334-2278

<039> Contact Email Address - Email Address of person identified in data line <030>

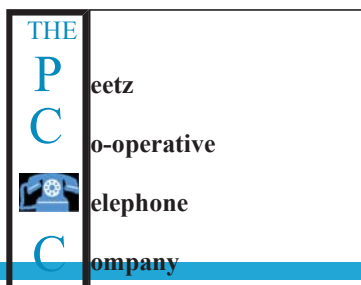
brent@peetzplace.com

· The company maintains a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations. {47 CFR §54.202(a)}

· The company has made reasonable provisions to meet emergencies resulting from power failures; sudden and prolonged increases in traffic; staff shortages; and fire, storm, and acts of god.
{4 CCR 732-2.2335 The Provision of Service During Maintenance or Emergencies}

<010> Study Area Code	462196
<015> Study Area Name	Peetz Coop Tel Co
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	Brent Davis
<035> Contact Telephone Number - Number of person identified in data line <030>	970-334-2278
<039> Contact Email Address - Email Address of person identified in data line <030>	brent@peetzplace.com

The company's retail monthly residential local service rate is \$15.50



The Peetz Co-operative Telephone Company
601 Main
P.O. Box 155
Peetz, CO 80747

Lifeline

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The Lifeline Service Program (Lifeline), sponsored by the FCC is a program designed to maintain and preserve universal service by providing a reduction in the price of basic residential exchange service to qualifying low-income customers. The Company's voice lifeline plan includes unlimited local minutes-of-use within the toll-free calling area at a discount of \$9.25. The Company's voice lifeline plan does not include any free minutes-of-use for toll.

A. GENERAL

- Lifeline is a federally funded reduction of basic local residential service. The federal credit amount provided to Lifeline subscribers will be the maximum amount authorized by the FCC.
- Local service for Lifeline customers may not be disconnected for nonpayment of toll charges.
- Partial payment from Lifeline customers will be applied first to local service charges and then to toll charges.
- Lifeline customers will not be denied reestablishment of service on the basis that the customer was previously disconnected for non-payment of toll charges.
- Lifeline will not be furnished on a Foreign Exchange service arrangement.
- Lifeline will be provided for one (1) telephone line per household.* Verification of this requirement will be through self-certification.

B. ELIGIBILITY REQUIREMENTS

There are 2 options for eligibility for Lifeline services:

Option 1. Applicants must provide to the Telephone Company the appropriate documents showing that he/she is currently a recipient of benefits from one of the following public assistance programs:

- Federal Public Housing Assistance/Section 8
- Low Income Home Energy Assistance Program (LIHEAP)
- Supplemental Nutrition Assistance Program
- General Assistance
- Supplemental Security Income (SSI)
- Temporary Assistance to Needy Families (TAR)
- Medicaid
- Food Distribution Program
- Free School Lunch Program
- Individuals living on tribal land receiving:
 - Food Distribution Program

- Bureau of Indian Affairs General Assistance
- Tribally administered Temporary Assistance for Needy Families (TANF)
- Head Start (tribal programs for only those meeting it's income qualifying standard)
- Tribally administered Free School Lunch Program

Option 2. Applicants may be eligible for the Lifeline Service Program if the household annual income level is at or below 135% of the federal poverty level. Such applicant may obtain a form from the Telephone Company suitable for self-certification of income level and provide the completed form to the Company to begin service under the program. Proof of income is required. Acceptable documentation may include the prior years federal, state, or tribal tax return, or other forms of income certification. Customers should contact the Company for specific details.

C. CERTIFICATION

The customer will certify eligibility for Lifeline Service. Recertification is required annually or at any time the qualifying criteria for the customer changes. Recipients of Lifeline Service must notify the Telephone Company when they no longer qualify for Lifeline Service. Upon receipt of the notification, the Telephone Company will discontinue Lifeline Service. If the Telephone Company discovers that conditions exist that disqualify the recipient of Lifeline Service, local service will be billed at the full rate. The customer will be billed retroactively either to the date Lifeline Service commenced or the date the recipient no longer qualified for the service, not to exceed twelve (12) months.

*A household is defined for Lifeline purposes as any group of individuals who live together at the same address and share income and expenses. A household is not permitted to receive Lifeline benefits from multiple providers and violation would result in de-enrollment and potential prosecution by the United States Government.

REDACTED - FOR PUBLIC INSPECTION

REDACTED

**[The Financial Report of The Peetz Cooperative Telephone Company is
redacted in its entirety as Highly Confidential Information]**